

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		07830	3/20
O.I.P.E. CLASSIFIER		15	3/20 00
FORMALITY REVIEW	DMK	69164	5/13/00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 +- ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
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